

Ozark Trail 75/100 September 21, 2019

From Bass River Resort, Steelville, MO to Brushy Creek Lodge, Black, MO

Rider Name: _____ AERC No. _____

Address: _____ City: _____ State: _____

Zip code: _____ E-mail: _____ Phone: _____

Weight Division (w/tack) Please circle one: Junior Featherweight (up to 160 lbs.)

Lightweight (161-185) Middleweight (186-210) Heavyweight (211 and over)

Horse Name: _____ AERC No. _____

Breed: _____ Age: _____ Sex: _____ Color: _____

Horse owner if different than rider: _____ AERC No. _____

PRE-ENTRIES MAIL TO: Barry C Cole, 18428 East 1st St., Eskridge, KS. 66423

PLEASE MAKE CHECKS OUT TO: Barry Cole or Linda Cole

FEES: Place a check mark by the distance you are entering.

___ 75 miles: (with Elevator option) ** ___ 100 miles \$153 AERC Non Member add \$15.00

** After completing 75 miles the rider shall have the option of elevating to the 100 mile distance but will only receive a completion after 100 miles with no placement as per AERC rules.

Total _____ Cash _____ Check # _____

LEGAL RELEASE: DO NOT SIGN UNTIL YOU HAVE READ!

As a participant in the Ozark Trail75/100 ride, I agree to abide by the rules of AERC and understand endurance riding involves being in remote areas for extended periods of time, away from communications, transportation and medical facilities; that these areas may have natural and man-made hazards which the ride management cannot control and identify, modify or eliminate; that horses can be excitable, difficult to control and unpredictable; and that accidents can happen to anyone at any time. I agree to take full responsibility for myself, my children, my animal(s) and my property and I will hold AERC, Bass River Resort, the Ozark Trail Association, US Forest Service, Brushy Creek Resort & Lodge, Ride Management, personnel and ride volunteers blameless for any accidents, injury or loss. I grant my permission for ride management to arrange emergency medical treatment if I am unable to do so myself.

Signature of rider _____ Date: _____

Parent/Guardian Signature for Junior Rider: _____ Date: _____

Emergency Contact Person _____ Phone No. _____

Your Cell number _____

CURRENT NEGATIVE COGGINS REQUIRED. ALL OUT OF STATE HORSES ARE REQUIRED TO HAVE A CURRENT HEALTH CERTIFICATE. ALL RIDERS ARE REQUIRED TO WEAR HELMETS!

This ride is being held in an isolated wilderness area on a difficult technical trail. Be Prepared!!

AERC sanctioned for 2019!

